03560.002163



IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

| In re Application of: |) | | |
|--|------------------|--------------------|------------------------|
| SHUICHI OKAMURA | : | Examiner: S. Tsega | ye |
| Application No.: 09/057,556 | ;) | TC/Art Unit: 2662 | RECEIVED |
| Filed: April 9, 1998 | :) | | SEP 1 6 2003 |
| For: IMAGE COMMUNICATION APPARATUS, IMAGE COMMUNICATION METHOD, AND RECORDING MEDIUM WHICH STORES THE METHOD | :) :) | September 12, 2003 | Technology Center 2600 |

Commissioner for Patents
Mail Stop: Non-Fee Amendment
P.O. Box 1450
Alexandria, VA 22313-1450

AMENDMENT

Sir:

In response to the Office Action dated June 17, 2003, the Examiner is

respectfully requested to amend the above-identified application as follows:

In re Application of:

SHUICHI OKAMURA

Application No.: 09/057,556

Filed: April 9, 1998

For: IMAGE COMMUNICATION APPARATUS, IMAGE COMMUNICATION METHOD, AND RECORDING

MEDIUM WHICH STORES THE METHOD

TC/Art Unit: 2662

Examiner: S. Tsegaye

Docket No. 03560.002163

Date: September 12, 2003

SEP 1 6 2003

Technology Center 2600

COMMISSIONER FOR PATENTS

Mail Stop: Non-Fee Amendment

P.O. Box 1450

Alexandria, VA 22313-1450

Sir:

Transmitted herewith is an Amendment in the above-identified application.

X No additional fee is required.

The fee has been calculated as shown below

| CLAIMS AS AMENDED | | | | | | |
|--|--|-------|--|-------------------------|----------------|-------------------|
| | (2) CLAIMS REMAINING AFTER AMENDMENT | | (4) HIGHEST NO. PREVIOUSLY PAID FOR | (5) PRESENT EXTRA | RATE | ADDITIONAL FEE |
| TOTAL CLAIMS | * 14 | MINUS | ** 20 | = 0 | x \$9 \$18 | 0 |
| INDEP. CLAIMS | * 3 | MINUS | *** | = 0 | x \$42 \$84 | 0 |
| Fee for Multiple Dependent claims \$140°/\$280 | | | | | 0 | |
| TOTAL ADDITIONAL FEE FOR THIS AMENDMENT | | | | | 0 | |

- * If the entry in Column 2 is less than the entry in Column 4, write "0" in Column 5.
- ** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, write "20" in this space.
- *** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, write "3" in this space.

| | OVerified Statement claiming small entity status is enclosed, if not filed previously. |
|--|--|
|--|--|

| | A check in the amount of \$ is enclosed. |
|---|---|
| | Charge \$ to Deposit Account No. 06-1205. A duplicate copy of this sheet is enclosed. |
| X | Any prior general authorization to charge an issue fee under 37 C.F.R. 1.18 to Deposit Account No. 06-1205 is hereby revoked. The Commissioner is hereby authorized to charge any additional fees under 37 C.F.R. 1.16 and 1.17 which may be required during the entire pendency of this application, or to credit any overpayment, to Deposit Account No. 06-1205. |
| | A check in the amount of \$ to cover the fee for amonth extension is enclosed. |
| | A check in the amount of \$ to cover the Information Disclosure Statement fee is enclosed. |
| | Applicant's undersigned attorney may be reached in our New York office by telephone at (212) 218-2100. All correspondence should continue to be directed to our address given below. |
| | Respectfully submitted, |
| | Attorney for Applicant Lock See Ju JAHNES Registration No. 38,667 |

FITZPATRICK, CELLA, HARPER & SCINTO 30 Rockefeller Plaza
New York, New York 10112-3801
Facsimile: (212) 218-2200

Form #120

NY_MAIN 359213v1